



TOWN OF LOS GATOS

LIBRARY BOARD APPLICATION

Submit to: Clerk Department

110 East Main Street, P.O. Box 949, Los Gatos, CA 95031

Telephone: (408) 354-6834 • Fax: (408) 354-8431 • Email: clerk@losgatosca.gov

Please type or print legibly

| | |
|--|----------------------------|
| * Last Name: _____ | * First Name: _____ |
| * Address: _____ | * City: _____ * Zip: _____ |
| * Home Phone: _____ | Work Phone: _____ |
| Email: _____ | Fax: _____ |
| Present Employer: _____ | Job Title: _____ |
| Length of Residency in Los Gatos: _____ | |
| * If appointed, this information will be made available to the public. | |

| Previously Held Elected or Appointed Governmental Positions | Position/Office Held | Dates |
|--|----------------------------------|-------|
| | | |
| | | |
| | | |
| Civic or Charitable Organizations You Have Belonged To | Position/Office Held | Dates |
| | | |
| | | |
| Schools Attended/Attending | Major Subject and/or Grade Level | |
| | | |
| | | |

A separate application is required for each Commission. Please list other Commissions you are applying to:

Signature: _____

Date: _____

Name of applicant: _____

1. Why are you interested in serving on the Library Board? _____

2. What Library services do you currently use or have used in the past? _____

3. Do you think the Library's current mix of services is appropriate or would you like to see some strengthened or diminished? _____

4. What are the strengths and weaknesses of the current library building? Does it provide adequate space and technology for the services of a modern library? _____

5. What do you hope to accomplish during your term on the Board? _____

6. Do you belong to the Friends of the Library? _____

Name of applicant: _____

7. Have you ever attended a Library Board or a Friends of the Library Board meeting? _____. If so, please provide a summary of your observation of the meeting. _____

8. What is the role of a Library Board member? How do you connect with the community? _____
